



NEW JERSEY DEPARTMENT OF TRANSPORTATION
DIVISION OF AERONAUTICS
INSPECTION & AIRCRAFT OPERATIONS

<http://www.state.nj.us/transportation/commuter/aviation/>

Phone: 609-530-2900/Fax: 609-530-4549

APPLICATION FOR SPECIAL LANDING STRIP LICENSE

Date: _____

The undersigned hereby applies for a permit to use a field owned by _____
(name)

of _____
(municipality) (latitude) (longitude)

at the following address _____

for the period from _____ to _____, for the purpose of loading dust or spray for
(date) (date)

farm or crop dusting in said area and agrees to abide by all regulations issued as a condition
for this permit (N.J.A.C. 16:55).

This license is issued contingent upon permission by the owner of the property concerned.

Such authorization shall accompany this application.

(Applicant Name)

(Signature)

(Address)

(Applicant's Licensed Facility Name and License #)

(Phone Number)

(Email address)

NOTE:

Applicant shall provide the following information:

- 1) Distance from nearest licensed, Public Use airport, landing field or landing strip;
- 2) Reason why said facility would not satisfy applicant's needs.